

FROM-RatnerPrestia

T-806 P.003/005 F-872

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or **Fax** (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23122 7590 11/16/2005

RATNERPRESTIA
P O BOX 980
VALLEY FORGE, PA 19482-0980

12/21/2005 TBESHAH2 00000112 10681533

01 FC:1501 1400.00 DP
02 FC:1504 300.00 DP
03 FC:1504

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/681,533	10/07/2003	Masaki Nakase	MAT-8456US	7284

TITLE OF INVENTION: OPENING AND CLOSING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	02/16/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILLIAMS, MARK A	3676	016-330000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 RatnerPrestia

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MATSUSHITA ELECTRIC INDUSTRIAL CO., LTD. OSAKA JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 18-0350 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name Lawrence E. Ashery

Date December 20, 2005

Registration No. 34,515

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



FROM-RatnerPrestia

T-806 P.001/005 F-872

**RatnerPrestia**
WE SPECIALIZE IN THE LAW OF CREATIVITY®

☒ Suite 301, One Westlakes, Berwyn
P.O. Box 980
Valley Forge, PA 19482-0980
Phone: 610-407-0700
Fax: 610-407-0701

☐ Nemours Building
1007 Orange Street, Suite 1100
P.O. Box 1596
Wilmington, DE 19899
Phone: 302-778-2500
Fax: 302-778-2600

www.ratnerprestia.com

☐ Suite 265
Commerce Corporate Center
5100 Tilghman Street
Allentown, PA 18104
Phone: 610-530-8100
Fax: 610-530-8200

FAX FILING IN U.S. PATENT & TRADEMARK OFFICEDATE: December 20, 2005

TIME: _____

TO:	USPTO MAIL STOP ISSUE FEE	FAX NO.:	571-273-2885
FROM:	Lawrence E. Ashery	ADMIN. ASST.:	Beth Johnson
APPLN. NO.:	10/681,533	ATTY. DOCKET NO.:	MAT-8456U5
TITLE OF APPLN.: OPENING AND CLOSING DEVICE			
FILING DATE:	October 7, 2003	ART UNIT:	3676
FIRST INVENTOR:	Masaki Nakase et al.	CONF. NO.:	7284
TITLE OF DOCUMENT (and List of Attachments): ISSUE FEE transmittal (in duplicate), PTO-2038, Transmittal form			

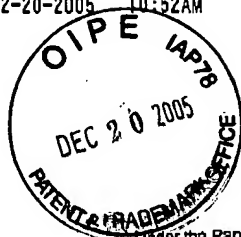
Total Number of Pages: 5 (including this form)

COMMENTS

CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION

This facsimile transmission (and/or documents accompanying it) may contain attorney/client privileged communications and confidential business information that is intended for use only by the individual or company to whom it is addressed. Disclosure, interception, copying or any other use of this transmission by anyone other than any intended recipient is prohibited. If you receive this transmission by mistake, please notify the sender.

Please notify us immediately if you have not received the number of pages indicated above.



PTO/SB/21 (09-04)

Approved for use through 7/31/2005. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/681,533
	Filing Date	October 7, 2003
	First Named Inventor	Masaki NAKASE, et al.
	Art Unit	3676
	Examiner Name	Mark A. Williams
	Attorney Docket No.	MAT-8456US
Total Number of Pages in This Submission		4

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard Issue Fee Transmittal PTO-2038 Fax Coversheet
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm Name	RatnerPrestia		
Signature			
Printed Name	Lawrence E. Ashery		
Date	December 20, 2005	Reg. No.	34,515

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			Date
Typed or Printed Name	Beth Johnson	Date	December 20, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.